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APPLICANTS

Richard A. Rubin, Pittsburgh, PA;
Kenneth A. Giuliano, Pittsburgh, PA;
Albert H. Gough, Glenshaw, PA;
R. Terry Dunlay, New Kensington, PA;
Bruce Ray Conway, Doylestown, PA;

**** CONTINUING DATA *******

This application is a CON of 09/352,171 07/12/1999 PAT 6,759,206 which claims benefit of 60/092,671 07/13/1998
and is a CIP of 08/810,983 02/27/1997 PAT 5,989,835

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 01/30/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 30	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Signature _____ Initials _____					

ADDRESS

20306

TITLE

SYSTEM FOR CELL-BASED SCREENING

FILING FEE RECEIVED 685	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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